

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no (703) 872-9306, on the date shown below.

Dated: April 5, 2004 Signature: _____
(John S. Curran)

OFFICIAL

Docket No.: SMQ-011
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Gary D. Foster

Application No.: 09/270141

Art Unit: 2124

Filed: March 16, 1999

Examiner: T. Ingberg

For: A SYSTEM AND METHOD FOR THE
GLOBAL DISTRIBUTION OF DATA

RECEIVED
CENTRAL FAX CENTER

APR 05 2004

#10/C

P. Curran
4-8-04

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated January 5, 2004 (Paper No. 9), please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper. Claims 1, 9, 10, 14, 17, 20, 38 and 43 have been amended. Claims 3-4, 18, and 45-52 have been cancelled. Claims 53-58 have been added. No new matter has been added.

Remarks/Arguments begin on page 10 of this paper.

RECEIVED
CENTRAL FAX CENTER

APR 05 2004

OFFICIAL

FAX TRANSMISSION**DATE:** April 5, 2004**PTO IDENTIFIER:** Application Number 09/270141-Conf. #2096
Patent Number**Inventor:** Gary D. FOSTER**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** LAHIVE & COCKFIELD, LLP

John S. Curran

PHONE: (617) 227-7400**Attorney Dkt. #:** SMQ-011**PAGES (Including Cover Sheet):** 17**CONTENTS:** Amendment Transmittal (1 page);
Amendment (13 pages);
Courtesy Copy of Form 1449 from Supp IDS (1 page); and
Certificate of Transmission under 37 CFR 1.8 (1 page).

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 227-7400 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

LAHIVE & COCKFIELD, LLP
28 State Street, Boston, Massachusetts 02109
Telephone: (617) 227-7400 Facsimile: (617) 742-4214

| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. SMQ-011 | |
|---|---|---|-----------------------------------|-----------------------------|-------------|
| Application No 09/270141-Conf. #2096 | Filing Date March 16, 1999 | Examiner T. D. Ingberg | Art Unit 2124 | | |
| Applicant(s): Gary D FOSTER | | | | | |
| Invention: A SYSTEM AND METHOD FOR THE GLOBAL DISTRIBUTION OF DATA (AS AMENDED) | | | | | |
| TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 34 | - 52 = | | x | 0.00 |
| Independent Claims | 9 | - 16 = | | x | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u> as described below. A duplicate copy of this sheet is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
| John S. Curran Attorney Reg. No.: 50,445 LAHIVE & COCKFIELD, LLP 28 State Street Boston, Massachusetts 02109 (617) 227-7400 | | | | Dated: <u>April 5, 2004</u> | |
| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below Dated: April 5, 2004 Signature: _____ (John S. Curran) | | | | | |

PTO/SB/97 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Certificate of Transmission Under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

on April 5, 2004
Date

Signature

John S. Curran

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Amendment Transmittal (1 page);
Amendment (13 pages);
Courtesy Copy of Form 1449 from Supp IDS (1 page); and
Certificate of Transmission under 37 CFR 1.8 (1 page).